Manitoba
Health

A New Partnership For Mental Health In Manitoba

A Manitoba **"Partners For Health"** Policy Paper
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Introduction

Over the years, the people and successive governments of Manitoba have developed a good health service system. Overall, we have a right to be proud of this achievement.

But excellence in health services is not something we can take for granted. Our population is changing, and our health needs change with it. Advances in the health sciences and health technology present us with new opportunities to improve both our health services and the actual health of Manitobans.

We all know that effective health services call for careful management and control of costs -- and that is a responsibility that everyone in Manitoba shares. But we also share a responsibility to work together for better health services and better health.

Government cannot achieve that goal alone. Instead, we need a broad partnership -- involving government, the health professions, community groups and individuals all across the province: a partnership for health.

We are working to build such a partnership now to make our health services better.

Nowhere is the need for improvement clearer than in the mental health area. We face a long list of challenges: shortages of qualified psychiatrists, the need for new initiatives to meet the mental health needs of the aged and of children and adolescents, the need to provide adequate services in all parts of the province.

We are determined to meet those challenges. This paper describes a new direction for mental health services in Manitoba -- a direction based on partnership and shared responsibility that can and will result in better mental health services for Manitobans.

I invite you to read the paper carefully. If you have comments or questions or suggestions, I hope you will write to me. And I hope that -- in your own profession and your own community, you will become an active member of this new partnership as we strive to improve mental health services in Manitoba.

Donald W. Orchard
Minister of Health for Manitoba

Mental Health in Manitoba: The Scope of the Challenge

Every year in Manitoba, some 10% to 15% of our population is affected by mental health problems. The problems may involve relatively minor depressions or general anxiety. They may involve severe disorders like schizophrenia.

And mental health problems affect people of all ages. When the problems are related to aging, they can undermine the ability of senior citizens to lead independent lives, forcing them to leave their homes and, in many cases, their communities.

When mental health problems affect the young, they can undermine the individual's ability to complete his or her education or build a firm foundation for the future. They can lead to suicide or to longer term psychiatric disabilities.

Without help, individuals throughout the community who suffer from various degrees of mental distress may have difficulties in holding jobs, meeting their family responsibilities or even maintaining a place to live.

Individuals who are being treated in hospitals or mental health centres can return to their local communities with ongoing help and support. Absence of community support services can mean that people are unnecessarily confined to institutions -- at greater cost to the taxpayer and with less acceptable human outcomes than would occur were there to be sufficient community support to permit them to return to their own homes and communities.

In 1987/88, some 95,000 Manitobans received mental health services from Manitoba's health care system at a total cost of some $200 million. Despite these large expenditures, many of those who suffer mental health problems have difficulty obtaining the health services they need.

Manitoba faces a shortage of qualified psychiatrists, especially outside Winnipeg. There are particular shortages of specialists in psychogeriatrics -- individuals trained in the treatment of mental health problems among the aged -- and of child and adolescent psychiatrists.

There are shortages of community mental health services -- services that can provide the help and support people need in their own communities and that can make it possible for people to manage their lives without being hospitalized or otherwise institutionalized.

And there are weaknesses in the links that should exist among all of the components of the mental health system in Manitoba -- among psychiatrists in private practice, community mental health agencies, hospitals, the community mental health services, the mental health centres, the Canadian Mental Health Association and other mental health advocacy groups.

Each component in the system is funded by Manitoba Health, but there has been no effective overall mental health planning done at the provincial level and there have been inadequate measures to ensure that all of the components work effectively together at the community level to respond to the needs of Manitobans.

The challenges are clear: we must build a more effective partnership for mental health, involving all of those who provide mental health services to provide the full range of services Manitobans require -- from prevention and early detection, to ongoing support programs, housing alternatives, vocational and employment programs, counselling, emergency and crisis support, out-patient, extended and acute care services, and long-term care in mental health centres where that is necessary.

To the greatest possible degree, these services should be provided locally to permit people to stay in their homes and their communities.

Those are the goals of Manitoba's new Partnership for Mental Health.

The Foundations of the Partnership

1. Integrating Mental Health Services in Every Region of Manitoba -- Partnership at the Local Level

The first foundation for Manitoba's new Partnership for Mental Health will be a series of community-based teams that will be formed in every region of Manitoba.

The first teams will be established immediately, in Winnipeg and in the Parklands Region, with teams established and operating in every region within two years. Each regional mental health team will combine the skills and expertise of such mental health workers as psychiatric nurses, social workers, children's mental health workers, occupational therapists, along with participation from the Canadian Mental Health Association and other local mental health support groups. The teams will have access to professional assistance from psychiatrists or psychologists.

A New Entry Point to Mental Health Services

The regional mental health teams will act as the "point of entry" for all those seeking mental health services. Their responsibility will be to ensure that each individual receives the appropriate kind of health care -- from preventative services to rehabilitation or community support services to clinical care in the community or in a suitable institution.

The focus of the team will be on the specific service needs of each individual patient, ensuring that all of the components of the mental health system work effectively and responsively together.

A Focus for Local and Regional Planning

The mental health teams will also work with all elements of the local and regional mental health community to respond to the particular needs of the population generally in the region. Where there are particular mental health needs in a region, the team will focus on developing programs to meet those needs. For example, if youth suicide rates are high in a region, the team will concentrate on developing preventative and detection programs to help at-risk young people.

The teams will work closely with the psychiatric programs of regional hospitals -- making referrals and ensuring that necessary community based services are provided to support those being discharged from such institutions. They will work in a similar way with the provincial mental health centres to ensure the development of realistic local and community based alternatives for those capable of being discharged from these facilities.

2. Managing Mental Health Services as a Single Integrated System: The Department of Health in the Partnership

Manitoba Health's own organizational structure has been one of the causes of weak linkages among the components of the mental health system in Manitoba.

There has been no clear overall responsibility for policy, planning and management of mental health services across Manitoba. Institutional services -- like Manitoba's mental health centres in Brandon and Selkirk -- have been planned and managed separately from community based services, and both have been planned and managed separately from the insured hospital and medical services provided through MHSC.

We will create a renewed Mental Health Division that will give the Department of Health the capacity to plan and to manage the entire mental health system as an active member of a broad partnership for mental health in Manitoba.

The Division will be headed by an Assistant Deputy Minister, and will have a broader mandate than in the past, reflecting the increased priority this government is placing on mental health services. It will be divided into two main components, each headed by an Executive Director.

The Executive Director of Programs will have primary responsibility for standards, assessing service and resource needs, developing new programs and services, staff training and development, and overall planning and policy in the mental health area. The Programs group will have three directors -- a Director of Promotion and Preventative Programs, a Director of Rehabilitation Programs (Psycho/Social), and a Director of Clinical Programs.

The group will work closely with psychiatrists, psychiatric nurses, the psychiatric programs of community hospitals, mental health agencies, the Canadian Mental Health Association and others -- including the members of the regional mental health teams -- to ensure that appropriate services are developed and provided to meet the needs of Manitobans.

The Executive Director of Mental Health Services will have primary responsibility for the ongoing operations of all components of the mental health services system. The Services Group will be responsible for the operations of regional mental health services, the Brandon and Selkirk Mental Health Centres, Forensic Services and Children's Psychiatric Services.

The focus of the Services Group will be on the provision of integrated services -- ensuring that the appropriate levels of service are available and provided to individuals throughout Manitoba. One priority area will be its work with the regional mental health teams to develop more effective links between institutional/clinical and community services to ensure that individuals receive appropriate levels of community support to permit them to remain in or return to the community successfully.

3. An Aggressive Partnership to Meet the Need for Psychiatrists

Manitoba has, for some years, faced an increasingly serious shortage of psychiatrists in general and of psychogeriatric and child/adolescent specialists in particular. The other prairie provinces are facing similar shortages, but the problem has become more acute in Manitoba. The situation here had deteriorated to the point where, by October 1988, the province was unable to provide adequate levels of psychiatric care for the 300 patients at the Brandon Mental Health Centre.

In responding to this crisis, Manitoba Health determined that the shortage of psychiatrists was most acute in Manitoba for two reasons.

The first was that the salaries paid to specialists who are employed by the government to provide psychiatric care to patients in the provincial mental health centres had been permitted to fall significantly behind those paid in other jurisdictions.

The second was a broader perception in the profession that health in general and mental health in particular have not been priorities for Manitoba in recent years. Government policies have focused narrowly on cost control; this has led to disruption in the cooperative relationships that should exist among the health professions and government and has contributed to significant levels of frustration throughout the entire health services system.

In the mental health area, the low salaries offered to government psychiatrists and the lack of adequate facilities in the province and in Winnipeg in particular were broadly interpreted as a signal that mental health was a low priority for this province.

The Department of Health, with the cooperation of the Manitoba Psychiatric Association and the Manitoba Medical Association, has already taken the first steps to build a partnership that can overcome these perceptions. After discussions with the Manitoba Medical Association, Manitoba Health has provided immediate salary increases to government employed specialists, to bring their compensation into line with that paid in the other prairie provinces.

The Department is working now -- with the medical profession as an active partner -- to recruit additional psychiatrists to come and practice in Manitoba. In the interim, dedicated psychiatrists in private practice and in the government's employ are cooperating with us to ensure that adequate levels of care are provided in our provincial mental health centres. We are working, too, in cooperation with the University and the profession, to attract and recruit a suitable Head of Psychiatry for the University of Manitoba. At the same time, we are moving to replace the current inadequate mental health facilities in Winnipeg.

The cooperative efforts of government and psychiatrists across Manitoba are only one part of the broader partnership for mental health that we are striving to build in Manitoba. One of the goals we share is the development of better links, cooperation and communication among all clinical and community based mental health services, and the medical profession actively supports this goal.

4. Immediate Service Improvements: The Partnership in Action

The new elements in Manitoba's Partnership for Mental Health -- the regional mental health teams, the enhanced provincial management of mental health services, the renewed partnership with the medical profession to meet the shortage of psychiatrists in Manitoba -- are all important steps towards a better, more effective and more humane mental health system for Manitoba.

But to make the new partnership truly effective, we must begin immediately to do a better job of providing needed services -- to meet already identified needs and to develop more effective ways of providing mental health services.

Through consultations with community mental health workers, the Canadian Mental Health Association, psychiatrists, psychiatric nurses and others throughout the mental health services system, the Department has identified six key pilot/demonstration projects that will lay the foundations for new services and new approaches to services as part of Manitoba's ongoing Partnership for Mental Health.

The Mobile Crisis Team Demonstration Project: Community Support when it is Needed

The Mobile Crisis Team Project will be based in Winnipeg, operating as part of the Winnipeg regional mental health services. Its job will be to provide immediate after hours service and support to chronically and acutely mentally ill people who encounter crises. The crises can range from housing problems to behavioural breakdowns to potential conflicts with the law. It is estimated that there are between 4,000 and 5,000 such crises in Winnipeg each year that are not responded to by the mental health services system of Manitoba.

Early and effective response in these situations can help people to maintain their independence. It can greatly enhance the ability of families to support their members. It can reduce costly police involvement with citizens at risk because of mental illness and ensure that the individuals receive the support needed to permit them an opportunity to live in the community.

The Mobile Crisis Team will provide these services to some 4,000 people in Winnipeg in its first year, and through its operations, the Partnership for Mental Health will develop effective models for this kind of emergency response as part of an integrated system of mental health services.

The Psychogeriatric Demonstration Project: Timely Care for Distressed Seniors

The Psychogeriatric Demonstration will be part of the Central Region regional mental health services. Its job will be the early identification of and response to older individuals whose independence is threatened by mental illness.

The goal will be early intervention, to provide preventative services and support to families and friends to permit older individuals to enjoy the greatest possible degree of ongoing independence. Where necessary, the project will ensure prompt referral to institutional or other clinical services -- with families being fully involved and informed.

The need for such services is highest in rural areas where the population is older on average and where community support systems tend to be less highly developed. The Project team will put the skills of a registered psychiatric nurse, social workers, an occupational therapist, geriatricians and psychologists to the task of providing the services older people need to manage mental health problems including age-related changes in a way that maximizes their independence.

In the process, the project will help Manitoba's new partnership for mental health to learn how such services are most effectively provided.

The Acute Treatment/Consultation Team for Children and Adolescents: A Gateway to Help for the Young

Today in Winnipeg, families seeking psychiatric help for their children and adolescents seeking help for themselves can face waiting periods of up to four months for an initial visit unless their situation is viewed as being a "crisis". That is not acceptable.

The Acute Treatment/Consultation Team for Children and Adolescents Project Team will assign the skills of a psychiatrist, psychologist and mental health workers to ensure that immediate help is available. The goal will be the minimum intervention necessary to avoid longer term problems -- handling the need quickly and then withdrawing (although continuing to be available).

The team will reduce waiting times for children, young people and their families. It will ensure early and effective treatment that can either begin a program of management of longer term problems, or avoid such problems.

In the process, this project will help Manitoba's new partnership for mental health to develop proven and innovative approaches to providing the mental health services that younger Manitobans need in a way that contributes to their longer term health and success.

The Youth Suicide Information Centres: Fighting Unnecessary Death

Between 1965 and 1985, the rate of suicide for young males increased by 660%. Research indicates that between 70% and 80% of youth suicides gave warning of their intentions -- often through an unsuccessful suicide attempt.

This project will have a very tough job; it will aim to provide people throughout health services in Manitoba with the information they need to detect the early warning signs and to respond in a way that lets life continue.

There is already broad concern -- among young people, parents, health professionals, mental health groups and others throughout the community -- who share a determination that the tragedy of youth suicide shall be contained.

The Youth Suicide Information Centre will act as "quarter-back" for a community wide partnership, refining our knowledge of the causes and signs and developing effective ways that we can intervene to avert tragedy.

In the process, the Centre will build working relationships with educators and community leaders, including the leadership of Indian bands and of urban native communities, who share our determination to reduce the costs of despair among the young -- to build real alternatives to that despair.

Proving the Regional Mental Health Teams Can Work: Making the Foundations Strong

This demonstration project will be located in the Parklands Region. Its job will be a challenging one: to provide the services that people need to make the transition from institutional care to a return to life in the community -- successfully.

The project team will work closely with the staff of the provincial mental health centres and the psychiatric programs of community hospitals to identify and respond to the needs that exist throughout these communities for community based services that will make it possible for people to move from institutions back into the lives of their communities.

And in the process, the team will help Manitoba's new partnership for mental health to learn how to provide community services in a way that makes it possible for mentally distressed people to receive treatment in institutions and then return -- successfully -- to their homes and families.

Proving the Regional Mental Health Teams Can Work: Meeting the Urban Challenge

The Winnipeg-based Regional Mental Health Team Demonstration Project will concentrate on building a firmer foundation for community living for individuals with mental ailments in Manitoba's largest urban centre.

The first focus for this team will be the Winnipeg Independent Group Living Program -- a community group home program. This program has been less successful than had been hoped for two main reasons.

The first is the lack of effective working relations between institutions and the community based elements of Manitoba's mental health services system: often the success of a patient's move from an institution to the community is inhibited by the inadequate communications between those working in institutions and those operating community programs.

The second reason relates to the inadequacies that exist due to staff shortages in many community programs. The Independent Group Living Program has faced such staffing problems.

This project team will address both those problems directly. Working closely with provincial mental health centres and the psychiatric programs of community hospitals to ensure better communication and a more effective transition for the patient. The team will also enhance the staff resources available to the Independent Living Program. This project will permit Manitoba's new partnership for mental health to develop effective community living programs as a bridge for those who are treated in institutions -- a bridge between the institution and renewed life in the community.

Conclusion

Manitobans have a great deal to be proud about in our health services system.

But Manitoba's mental health services have been neglected. Despite the best efforts of the hundreds of dedicated men and women who work throughout mental health services in this province, we have been abandoning people -- men, women and children -- across this province.

That is going to end now. **Manitoba's new Partnership for Mental Health will ensure that those who suffer from mental distress receive the care, the services and the support they need to live their lives as we all wish to live ours: with the greatest independence and health we can achieve.**

Please -- join the partnership!